U.S. DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expires March 31, 2012

National Flood Insurance Program

Signature

Important: Read the instructions on pages 1-9.

SECTION A - PROPERTY INFORMATION	For Insurance Company Use:
A1. Building Owner's Name SAI Financial LTD	Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 319 Grinnell Street	Company NAIC Number
City Key West State FL ZIP Code 33040	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) - KW SUB 10 PT LT 2 SQR 19; RE# 00002680-000000	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential	
A5. Latitude/Longitude: Lat. 24 33 39.6 Long. 081 47 53.3 Horizontal Datum A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number 5	n: □ NAD 1927 ⊠ NAD 1983
A8. For a building with a crawlspace or enclosure(s): A9. For a building with an atta	ched garage:
a) Square footage of crawlspace or enclosure(s) <u>NA</u> sq ft a) Square footage of atta	
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade NA within 1.0 foot above a	d openings in the attached garage
c) Total net area of flood openings in A8.b NA sq in c) Total net area of flood	
d) Engineered flood openings?	
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATIO	N
B1. NFIP Community Name & Community Number City of Key West 120168 B2. County Name Monroe	B3. State Florida
B4. Map/Panel Number B5. Suffix B6. FIRM Index B7. FIRM Panel B8. Flood 12807C-1516 K Date Effective/Revised Date Zone(s) 02-18-05 02-18-05 AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)
i10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.	
☐ FIS Profile ☐ FIRM ☐ Community Determined ☐ Other (Describe)	
11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other (Describe	e)
12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Designation Date CBRS OPA	☐ Yes ☐ No
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIR	ED)
Building elevations are based on: Construction Drawings* Building Under Construction*	
*A new Elevation Certificate will be required when construction of the building is complete. 2. Elevations – Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AF	H AR/AO Complete Items C2 a-h
below according to the building diagram specified in Item A7. Use the same datum as the BFE.	i, worker demplote frome obliging
Benchmark Utilized PID AA0004 EL. 5.11' Vertical Datum NGVD29	
Conversion/Comments NA	
Check the measurer	
a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 4.3	- '
b) Top of the next higher floor NA feet meters (Puerloc) Bottom of the lowest horizontal structural member (V Zones only) NA feet meters (Puerloc)	**
d) Attached garage (top of slab) NA.	• •
e) Lowest elevation of machinery or equipment servicing the building 4.0	- 1
(Describe type of equipment and location in Comments)	
f) Lowest adjacent (finished) grade next to building (LAG) 2.5	o Rico only)
g) Highest adjacent (finished) grade next to building (HAG) 3.1	
h) Lowest adjacent grade at lowest elevation of deck or stairs, including NA.	o Rico only)
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATIO	
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation of information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.	on one of the state of the stat
	O I I
Certifier's Name Joe Robert White License Number 6688	6 3 6 2
Fitle Professional Surveyor & Mapper Company Name Reece & White Land Surveying Inc.	TE STATE OF S
Address 127 Industrail Road Suite B City Big Pine Key State FL ZIP Code 33043	- V . CON 9 . 13

Date 04/17/12

Telephone 305-872-1348

319 Grinnell Street	all College and the Did At 1 DO =	from Section A.		or Insurance Company Use:
	nit, Suite, and/or Bldg. No.) or P.O. Route	e and Box No.	F	Policy Number
City Key WestState FL ZIP Code 33040			l c	company NAIC Number
SECTION D	- SURVEYOR, ENGINEER, OR ARC	CHITECT CERTIFICA	ATION (CONTI	NUED)
Copy both sides of this Elevation Certificat	te for (1) community official, (2) insurance	agent/company, and (3	B) building owner	
Comments C2e) Bottom of water heater I	located on a wood deck on the east side	of the home.		
11 Voice # 1204 1301				
1				
Signature Dea	D	ate 04/17/12		
SECTION E - BUILDING ELEVAT	TION INFORMATION (SURVEY NO	T REQUIRED) FOR 2	ZONE AO AND	Check here if attachme ZONE A (WITHOUT BFF)
For Zones AO and A (without BFE), compland C. For Items E1-E4, use natural grade E1. Provide elevation information for the grade (HAG) and the lowest adjacen a) Top of bottom floor (including base b) Top of bottom floor (including base E2. For Building Diagrams 6-9 with perm (elevation C2.b in the diagrams) of the E3. Attached garage (top of slab) is	lete Items E1-E5. If the Certificate is intee, if available. Check the measurement of following and check the appropriate boxed to grade (LAG). Bement, crawlspace, or enclosure) is ement, crawlspace, or enclosure) is ement, crawlspace, or enclosure) is enent flood openings provided in Section to building is feet	anded to support a LOM/ used. In Puerto Rico on es to show whether the of feet feet A Items 8 and/or 9 (see meters above or below the F feet me floor elevated in accorda s information in Section	A or LOMR-F req ly, enter meters. elevation is above meters abo meters above pages 8-9 of Ins below the HAI lAG. eters above of ince with the corr G.	uest, complete Sections A, B, e or below the highest adjacent ve or below the HAG. ve or below the LAG. structions), the next higher floor G. r below the HAG. munity's floodplain managemen
ne property owner or owner's authorized r	representative who completes Sections A	, B, and E for Zone A (w	vithout a FEMA-is	
r Zone AO must sign here. The statement	ts in Sections A, B, and E are correct to t	he best of my knowledg	е.	, , , , , , , , , , , , , , , , , , , ,
roperty Owner's or Owner's Authorized Re	epresentative's Name			
ddress	City		State	ZIP Code
ignature	Date		Telephone	
omments				
A white testing the common com				
	SECTION G - COMMUNITY INFO	RMATION (OPTION	AI)	Check here if attachme
e local official who is authorized by law or o	ordinance to administer the community's	floodolain management	ordinance can co	emplete Sections A, B, C (or E),
G of this Elevation Certificate. Complete The information in Section C was ta	the applicable item(s) and sign below. Caken from other documentation that has b			
is authorized by law to certify eleval	tion information. (Indicate the source and	d date of the elevation d	ata in the Comme	ents area below.)
	ction E for a building located in Zone A (w			ed BFE) or Zone AO.
	I-G9) is provided for community floodplair			
4. Permit Number G5.	Date Permit Issued	G6. Date Certifica	te Of Compliance	e/Occupancy Issued
This permit has been issued for:	New Construction	Improvement		
Elevation of as-built lowest floor (including	ng basement) of the building:		(PR) Datum	
BFE or (in Zone AO) depth of flooding at	t the building site:	feet meters		
). Community's design flood elevation	Manager Pall and Control of Contr			
aal Official's Na		Title		
Car Official's Name				
2775	T	Telephone		
ocal Official's Name ommunity Name ignature		l elephone Date		
ommunity Name 18360 gnature		*		
ommunity Name		*		
ommunity Name		*		
ommunity Name		*		

Building Photographs

See Instructions for Item A6.

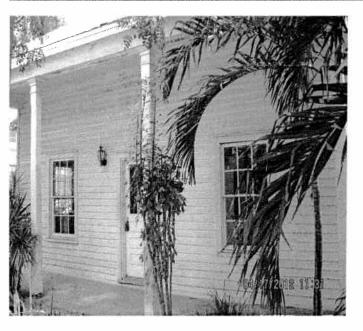
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

City Key West State FL ZIP Code 33040

For Insurance Company Use:
Policy Number

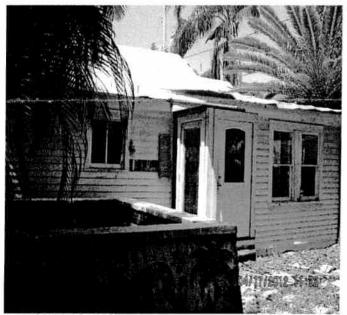
Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two building photographs below according to the instructions for Item A6. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." If submitting more photographs than will fit on this page, use the Continuation Page on the reverse.









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Building Photographs Continuation Page

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 319 Grinnell Street	Policy Number
City Key West State FL ZIP Code 33040	Company NAIC Number

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View."



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